

<input type="checkbox"/> *Total of _____ forms are submitted.			
NOTE: Signatures of all the inventors or assignees of record & the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
Date	<i>7/10/07</i>		
Signature			
Name	Gordon Campbell President and CEO GST Holdings, LLC		
SIGNATURE of Applicant or Assignee of Record			
<input checked="" type="checkbox"/> Assignment of record of the entire interest. See 37 CFR 3.71. <input checked="" type="checkbox"/> Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
<input type="checkbox"/> Applicant/Inventor. <input type="checkbox"/> I am the:			
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<b>I hereby revoke all previous powers of attorney given in the above-identified application.</b>			

REVOCATION OF POWER OF ATTORNEY WITH	
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AND CHANGE OF	
CORRESPONDENCE ADDRESS	
First Named Inventor	Shardad SAMBHANI
Group Att Unit	3645
Examiner Name	Rhonda L. Murphy
Attorney Docket	046301-051000
Number	<input type="text"/>
Filed/Issue Date:	November 21, 2006
Patent No.:	7,139,256
Application No./	

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